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Bib Data Sheet

CONFIRMATION NO. 3822

|                             |                                   |              |                        |                                      |
|-----------------------------|-----------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER<br>10/035,765 | FILING DATE<br>12/24/2001<br>RULE | CLASS<br>348 | GROUP ART UNIT<br>2612 | ATTORNEY<br>DOCKET NO.<br>10011327-1 |
|-----------------------------|-----------------------------------|--------------|------------------------|--------------------------------------|

## APPLICANTS

Norman C. Pyle, Greeley, CO;

## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/05/2002

|                                 |   |                        |                        |                       |                            |
|---------------------------------|---|------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input type="checkbox"/> no  | STATE OR COUNTRY<br>CO | SHEETS<br>DRAWING<br>5 | TOTAL<br>CLAIMS<br>20 | INDEPENDENT<br>CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                        |                        |                       |                            |
| Verified and Acknowledged       | Examiner's Signature  | Initials               |                        |                       |                            |

## ADDRESS

HEWLETT-PACKARD COMPANY  
 Intellectual Property Administration  
 P.O. Box 272400  
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## TITLE

User-controlled exposure method and system with visual feedback

|                            |   |   |
|----------------------------|---|---|
| FILING FEE RECEIVED<br>740 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other<br><input type="checkbox"/> Credit |
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